PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

0978/042

RATE FEE BASIC FEE S\$5.00 OR S\$18-	_		CLAIMS AS	SMALL EN	√TITY	OR	OTHER SMALL I						
FOR	TC	TAL CLAIMS		(Column	65			[FEE	1		
TOTAL CHARGEABLE CLAIMS	FC)R		NUMBER	NUMBER FILED		BER EXTRA				OR		
NDEPENDENT CLAIMS	TC	TAL CHARGEA	BLE CLAIMS	65 mir	nus 20=	*	45		X\$ 9=	345	1 1		
### AMDITPLE DEPENDENT CLAIM PRESENT * If the difference in column 1 is less than zero, enter "0" in column 2 **CLAIMS AS AMENDED - PART II (Column 2) (Column 3) **CLAIMS AS AMENDED - PART II (Column 2) (Column 3) **CLAIMS AS AMENDED - PART II (Column 2) (Column 3) **CLAIMS AS AMENDED - PART II (Column 3) **Independent	INE	DEPENDENT CI	LAIMS	 	inus 3 =	* 4	\$	[]		<u> </u>	1 1	\	
* If the difference in column 1 is less than zero, enter "0" in column 2 **CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) (Column 3) (Column 3) (Column 3) (Column 3) (Column 4) (Column 4) (Column 5) (Column 5) (Column 6) (Column 7) (Column 7) (Column 8) (Column 8) (Column 8) (Column 9) (Column 1) (Column 1) (Column 1) (Column 2) (Column 1) (Column 2) (Column 3) (Column 3) (Column 4) (Column 4) (Column 5) (Column 6) (Column 7) (Column 7) (Column 8) (Column 8) (Column 9) (Column 1) (Column 1) (Column 1) (Column 1) (Column 1) (Column 2) (Column 1) (Column 1) (Column 2) (Column 3) (Column 3) (Column 4) (Column 4) (Column 4) (Column 5) (Column 5) (Column 6) (Column 6) (Column 7) (Column 7) (Column 7) (Column 8) (Column 8) (Column 8) (Column 9) (Column 1) (Column 1) (Column 1) (Column 1) (Column 1) (Column 2) (Column 3) (Column 3) (Column 4) (Column 4) (Column 4) (Column 4) (Column 5) (Column 6) (Column 6) (Column 7) (Column 7) (Column 7) (Column 8) (Column 8) (Column 8) (Column 1) (Column 1) (Column 1) (Column 1) (Column 1) (Column 2) (Column 1) (Column 1) (Column 2) (Column 3) (Column 3) (Column 4) (Column 4) (Column 4) (Column 4) (Column 4) (Column 5) (Column 6) (Column 6) (Column 7) (Column 7) (Column 8) (Column 8										760	OH		
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Column 1)	ĺ							L	TOTAL			TOTAL	
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+135= OR +270=		FIRST PRESE	NTATION OF MU	JLTIPLE DEP	'ENDENT	CLAIM		│ ├				 	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.	• 1	if the entry in colu	mn 1 is less than th	ne entry in colu	ımn 2, write	э "0" in co	olumn 3.	L			OR		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.	•••	If the "Highest Nun If the "Highest Nur	mber Previously Pa Imber Previously Pa	aid For" IN THIS aid For" IN THIS	S SPACE is IS SPACE is	is less thar is less thai	an 20, enter "20." an 3, enter "3."	~	DDIT. FEE		1 4	ADDIT. FEE L	